

APPLICATION FOR A CERTIFIED COPY OF A VITAL RECORD
APLICACION PARA COPIAS CERTIFICADAS

Name of Applicant <i>(Nombre de Apicante)</i>			Relationship to Person on Record (Proof is required) <i>[Relacion al individuo (Prueba es requerida)]</i>	Reasons for request: <i>(Motivo de solicitud)</i> <input type="checkbox"/> Passport <i>(Pasaporte)</i> <input type="checkbox"/> Driver License <i>(Licencia de Conducir)</i> <input type="checkbox"/> School/Sports <i>(Escuela/Deportes)</i> <input type="checkbox"/> Veteran's Benefits <i>(Beneficios veteranos)</i> <input type="checkbox"/> Social Security Card <i>(Tarjeta Seguro Social)</i> <input type="checkbox"/> Social Security Disability <i>(SSI/Incapacidad)</i> <input type="checkbox"/> Other SS Benefits <i>(Otros beneficios de seguro social)</i> <input type="checkbox"/> Medicare <i>(Medicare)</i> <input type="checkbox"/> Welfare <i>(Asistencia Publica)</i> <input type="checkbox"/> Other <i>(Otro)</i> _____
Current Mailing Address (Must Match address on ID) <i>[Direccion Postal (Debe coincidir con identificacion)]</i>				
City <i>(Ciudad)</i>	State <i>(Estado)</i>	Zip Code <i>(Codigo Postal)</i>	Telephone Number <i>(Numero Telefonico)</i>	
Applicant's Signature <i>(Firma del Apicante)</i>			Date of Application <i>(Fecha)</i>	

<input type="checkbox"/> BIRTH <i>(NACIMIENTO)</i>	Full Name of Child at Time of Birth <i>(Nombre Completo al Nacer)</i>		No. Requested Copies <i>(No. de Copias)</i>
	Place of Birth (City, Town) <i>[Lugar de Nacimiento (Ciudad, Pueblo)]</i>	County <i>(Condado)</i>	Exact Date of Birth <i>(Fecha de Nacimiento)</i>
	Full Name of Child's Parent A <i>(List name given at birth or on birth certificate)</i> <i>[Nombre completo de Padre/Madre A (Inscrito en el acta de nacimiento)]</i>		
	Full Name of Child's Parent B (if on record) <i>(List name given at birth or on birth certificate)</i> <i>[Nombre completo de Padre/Madre B (si el registro) (Inscrito en el acta de nacimiento)]</i>		
	If the Child's Name was Changed, Indicate New Name and How is was Changed: <i>(Si el nombre del nino fue cambiado, indique el nuevo nombre y como fue cambiado)</i>		

<input type="checkbox"/> MARRIAGE <i>(MATRIMONIO)</i>	Full Name of Spouse A/Partner A <i>(List name given at birth or on birth certificate)</i> <i>[Nombre de Esposo/Pareja (Inscrito en el acta de nacimiento)]</i>		No. Requested Copies <i>(No. de Copias)</i>
	Full Name of Spouse B/Partner B <i>(List name given at birth or on birth certificate)</i> <i>[Nombre de Esposo/Pareja (Inscrito en el acta de nacimiento)]</i>		Exact Date of Event <i>(Fecha Exacta del Evento)</i>
	Place of Event (City, Town) <i>[Lugar del Evento (Ciudad, Pueblo)]</i>	County <i>(Condado)</i>	

<input type="checkbox"/> DEATH <i>(DEFUNCION)</i>	Name of Deceased Individual <i>(Nombre del Fallecido)</i>		
	Exact Date of Death <i>(Fecha Exacta del Evento)</i>	No. Requested Copies <i>(No. de Copias)</i>	
	Place of Event (City, Town) <i>[Lugar del Evento (Ciudad, Pueblo)]</i>	County <i>(Condado)</i>	
	Full Name of Deceased Individual's Parent A <i>(List name given at birth or on birth certificate)</i> <i>[(Nombre completo de Padre/Madre A) (Inscrito en el acta de nacimiento)]</i>	Full Name of Deceased Individual's Parent B <i>(List name given at birth or on birth certificate)</i> <i>[(Nombre completo de Padre/Madre B) (Inscrito en el acta de nacimiento)]</i>	

Application Checklist: Have you enclosed and completed all required information?
(Lista Comprobada: A Usted Incluido y Completado Toda la Informacion Requerida en la Aplicacion?)

All Items on Application Payment Acceptable Forms of ID Proof of Relationship Mailing Address Matches ID
(Todo Articulos en la Aplicacion) (Pago) (Identificacion Aceptable) (Prueba de Parentesco) (Direccion Postal Coincidente con ID)

FOR MUNICIPAL USE ONLY			
Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> M/O <input type="checkbox"/> Waived	Payment Amount: \$	ID Viewed: Processed By:

City of Linwood
Application Process
For obtaining a Certified Copy of a Vital Record

Certified Copies have the raised seal of the office issuing the record and are always issued on State of New Jersey safety paper. Certified copies may be used to establish identity and are legal documents.

Applications **require** the applicant to provide a completed application, valid proof of identity, payment of fee¹, and proof that establishes you are:

- The subject of the record,
- The subject's parent, legal guardian or legal representative,
- The subject's spouse/civil union partner, domestic partner, child, grandchild or sibling, if of legal age
- A state or federal agency for official purposes, or
- Pursuant to a court order.

Valid proof of identity:

- A valid photo driver's license or photo non-driver's license with current address
- OR**
- A valid driver's license without photo and one alternate form of ID with current address
- OR**
- Two alternate forms of ID, one of which must have current address.

Alternate forms of ID are:

Vehicle registration	Federal/State ID
Vehicle insurance card	County ID
Voter registration	School ID
US/Foreign Passport	Bank Statement (within previous 90 days)
Immigrant Visa	Utility bill (within the previous 90 days)
Permanent Resident Card (Green Card)	Tax Return or W-2 for current/previous tax year

Proof of relationship:

- **Your own birth certificate** and you have assumed your spouse's/civil union partner's surname (You must provide a copy of the certified copy of your marriage/civil union certificate to link the name on your current ID to the name on your birth certificate)
- **Your child's birth certificate** (You don't need any additional documents)
- **Your spouse's/civil union partner's birth certificate** (You must provide a copy of your marriage/civil union certificate)
- **Your parent's or sibling's vital record** (You must provide a copy of your birth certificate)
- **Your grandparent's vital record** (You must establish that you are the person's grandchild by providing proof that links the name on your ID to the name of the grandparent)
For example, if you changed your last name after marriage/civil union and want a grandparent's vital record, you must:
 1. Provide your marriage/civil union certificate to show your name at birth,
 2. Provide your birth certificate to identify your parent, and
 3. Provide the parent's birth certificate to identify the grandparent.
- **You are helping a person receive a certified copy of a vital record** they are eligible to receive (You must show your valid ID and a notarized, written release authorizing you to get the record on that person's behalf OR, you can supply a written release from the person you are helping along with a copy of that person's valid photo ID)

If you are an Attorney

- Who is the **executor** of an estate (You must supply proof of appointment as the executor)
- Who is the **legal representative of the executor** of an estate (You must supply proof of legal retainer by the executor and proof of the appointment of the individual as the executor)
- Who is the **legal representative of an individual** that is eligible to receive a certified copy of a vital record (You must supply proof of legal retainer by the eligible individual and their proof of relationship)

¹ **The fee for a certified copy is \$15.00. Make check payable to the City of Linwood. Mailing address: 400 Poplar Avenue, Linwood, NJ 08221**